



General Assembly

January Session, 2007

**Substitute Bill No. 6976**

\* \_\_\_\_\_HB06976HS\_APP031307\_\_\_\_\_\*

**AN ACT CONCERNING CHRONIC CARE MANAGEMENT.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1       Section 1. (NEW) (*Effective October 1, 2007*) As used in sections 1 to 5,  
2       inclusive, of this act:

3       (1) "Chronic care" means health care services provided by a health  
4       care provider for an established clinical condition that is expected to  
5       last for at least one year and requires ongoing clinical management in  
6       order to restore the individual to the highest level of function,  
7       minimize the negative effects of the clinical condition and prevent  
8       complications related to chronic conditions such as diabetes,  
9       hypertension, cardiovascular disease, cancer, asthma, pulmonary  
10      disease, substance abuse, mental illness, spinal cord injury and  
11      hyperlipidemia.

12      (2) "Chronic care management" means a system of coordinated  
13      health care interventions and communications for individuals with  
14      chronic conditions, including significant patient self-care efforts,  
15      systemic supports for the health care provider and patient relationship,  
16      and a plan of care emphasizing prevention of complications utilizing  
17      evidence-based practice guidelines, patient empowerment strategies  
18      and evaluation of clinical, humanistic and economic outcomes on an  
19      ongoing basis with the goal of improving overall health.

20 (3) "Health care provider" means any person, corporation, limited  
21 liability company, facility or institution operated, owned or licensed by  
22 this state to provide health care services.

23 (4) "Health risk assessment" means screening by a health care  
24 provider for the purpose of assessing an individual's health, including  
25 tests or physical examinations and a survey or other tool used to  
26 gather information about an individual's health, medical history and  
27 health risk factors during a health screening.

28 Sec. 2. (NEW) (*Effective October 1, 2007*) (a) Not later than October 1,  
29 2008, the Commissioner of Public Health, in coordination with the  
30 Secretary of the Office of Policy and Management, shall develop a five-  
31 year strategic plan for a state-wide system of chronic care  
32 management.

33 (b) (1) The strategic plan shall include:

34 (A) A description of the chronic care management system,  
35 including, but not limited to, chronic care infrastructure, patient self-  
36 management programs, community initiatives, and health system and  
37 information technology, which technology may be used uniformly  
38 state-wide by private insurers, third party administrators and public  
39 programs;

40 (B) A description of prevention programs and ways to integrate  
41 such programs into communities, with chronic care management;

42 (C) Reimbursement systems aligned with the goal of managing the  
43 care of individuals with or at risk for chronic conditions in order to  
44 improve outcomes and the quality of care;

45 (D) The involvement of public and private groups, health care  
46 providers, insurers, third-party administrators, associations and firms  
47 to facilitate and assure the sustainability of a new system of chronic  
48 care;

49 (E) The involvement of community and consumer groups to  
50 facilitate and assure the sustainability of health care services  
51 supporting healthy behaviors and good patient self-management for  
52 the prevention and management of chronic conditions;

53 (F) Alignment of any information technology needs with other  
54 health care information technology initiatives;

55 (G) The use and development of outcome measures and reporting  
56 requirements, aligned with existing outcome measures within the  
57 Departments of Public Health and Social Services, to assess and  
58 evaluate the system of chronic care;

59 (H) Target timelines for inclusion of specific chronic conditions in  
60 the chronic care infrastructure and for state-wide implementation of  
61 the chronic care management plan;

62 (I) Identification of resource needs for implementation and  
63 sustainment of, the chronic care management system and strategies to  
64 meet those needs;

65 (J) Protocols for maintaining patient privacy and the security of  
66 health system and information technology; and

67 (K) A strategy for ensuring state-wide participation in the chronic  
68 care management plan no later than January 1, 2010, by insurers, third-  
69 party administrators, health care providers, hospitals and other  
70 professionals and consumers, including, but not limited to, common  
71 outcome measures, best practices and protocols, data reporting  
72 requirements, payment methodologies and other standards.

73 (2) The Commissioner of Public Health shall review the five-year  
74 strategic plan for chronic care management biennially, and amend the  
75 plan as necessary to reflect changes in state-wide priorities.

76 (c) (1) On October 1, 2009, and annually thereafter, the  
77 Commissioner of Public Health shall report, in accordance with the

78 provisions of section 11-4a of the general statutes, on the status of  
79 implementation of the chronic care management plan to the joint  
80 standing committees of the General Assembly having cognizance of  
81 matters relating to public health, human services, insurance and  
82 appropriations. The report shall include the number of insurers, health  
83 care providers and patients currently participating in the chronic care  
84 management plan; the progress for achieving state-wide participation  
85 in the plan; the status of the individual components of the plan  
86 described in subdivision (1) of subsection (b) of this section; annual  
87 expenditures and savings associated with the plan; the results of health  
88 care provider and patient satisfaction surveys; the progress toward  
89 creation and implementation of privacy and security protocols; any  
90 amendments to the plan as a result of the biennial review undertaken  
91 pursuant to subdivision (2) of subsection (b) of this section; and such  
92 other information as requested by the committees.

93 (2) If state-wide participation in the chronic care management plan  
94 is not achieved by January 1, 2012, the Commissioner of Public Health,  
95 in coordination with the Secretary of the Office of Policy and  
96 Management, shall evaluate the chronic care management plan and  
97 report any recommendations for changes to the plan to ensure state-  
98 wide participation by health insurers, third-party administrators and  
99 health care providers to the joint standing committees of the General  
100 Assembly having cognizance of matters relating to public health,  
101 human services, insurance and appropriations, in accordance with  
102 section 11-4a of the general statutes.

103 Sec. 3. (NEW) (*Effective from passage*) (a) There is established a  
104 Chronic Care Management Advisory Committee. The committee shall  
105 consist of the Commissioners of Public Health, Health Care Access and  
106 Social Services and the Insurance Commissioner and nine members  
107 appointed as follows: One by the Governor; two each by the president  
108 pro tempore of the Senate and the speaker of the House of  
109 Representatives; one each by the majority leaders of the Senate and the  
110 House of Representatives; one each by the minority leaders of the

111 Senate and the House of Representatives. Members shall serve for a  
 112 term of five years commencing on October first. No member may serve  
 113 for more than two consecutive five-year terms. All initial appointments  
 114 to the committee shall be made by October 1, 2007. Any vacancy shall  
 115 be filled by the appointing authority.

116 (b) The Commissioner of Public Health shall serve as the  
 117 chairperson of the committee and shall schedule the first meeting of  
 118 the committee, which shall be held no later than December 1, 2007.

119 (c) The committee shall (1) advise the Commissioner of Public  
 120 Health and the Secretary of the Office of Policy and Management on  
 121 the development and implementation of the five-year strategic plan for  
 122 a state-wide system of chronic care management, as described in  
 123 section 2 of this act, (2) engage a broad range of health care providers,  
 124 health insurance plans, professional organizations, community and  
 125 nonprofit groups, consumers, businesses, school districts, and state  
 126 and local government in developing and implementing the five-year  
 127 strategic plan, and (3) assist in developing health care provider and  
 128 patient satisfaction surveys for the purpose of evaluating the five-year  
 129 strategic plan.

130 Sec. 4. (NEW) (*Effective October 1, 2007*) Upon completion of the five-  
 131 year strategic plan for chronic disease management, in accordance  
 132 with section 2 of this act, the Commissioner of Social Services shall  
 133 report, in accordance with section 11-4a of the general statutes, to the  
 134 joint standing committees of the General Assembly having cognizance  
 135 of matters relating to social services and public health concerning any  
 136 recommended waivers, wavier modifications or statutory changes  
 137 necessary to fully implement the five-year strategic plan within the  
 138 Department of Social Services.

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2007	New section

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Sec. 2	<i>October 1, 2007</i>	New section
Sec. 3	<i>from passage</i>	New section
Sec. 4	<i>October 1, 2007</i>	New section

**PH**      *Joint Favorable Subst. C/R*      HS

**HS**      *Joint Favorable Subst. C/R*      APP